Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

BHT-3223-33

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
			(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			3					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		84	asic fee	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3 _ minus 20=		*6			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ - minus 3 =		0			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in column 2		<u>ا</u> 1	OTAL	3H.U	9R	TOTAL	
CLAIMS AS AMENDED - PART II								ď		•	OTHER	THAN
_		(Column 1)		(Colur		(Column 3)	. <u>.</u>	MALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	<u> </u>		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
			DIT. FEE		•	ADDIT. FEET						
<u></u>		(Column 1) CLAIMS		(Colur	EST	(Column 3)	1 _		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CLAIM	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NIATION OF MI	OLIPLE DEF	ENDEN	CLAIM		, -	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DIT. FEE		1	ADDIT. FEE	
		CLAIMS		HIGH		(Column 3)	1 —		4551			4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [;	X\$ 9=		OR	X\$18=	1 22
	Independent	*	Minus	***		=]	X42=			X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.01-	
+140= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE I	s less tha	n 20, enter *20.	." ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
***	it the "Highest Nu The "Highest Nurr	mber Previously P ber Previously Pa	aid For" IN THI id For" (Total o	S SPACE i r Independ	s less tha ent) is the	in 3, enter "3." e highest numbe		_	propriat box			